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| Fill in this information to identify your case: | | |
|---|---|------------------------------------|
| United States Bankruptcy Court for the: Northern District of: Illinois (State) | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | Belinda | |
| Write the name that is on your government-issued | First name | First name |
| picture identification (for example, your driver's | Middle name Plange | Middle name |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last 8 years | First name | First name |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX5380 | xxx - xx |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| D | ebtor 1 Belinda First Name | Plange Middle Name Last Name | Case number (if known) |
|----|--|---|--|
| | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 6430 N Francisco Ave Apt: 1A Number Street 1a | Number Street |
| | | Chicago Illinois 60645 | |
| | | City State Zip Code | City State Zip Code |
| | | Cook County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | | |
| _ | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | - |
| | | | |
| | | | - |
| | | | |
| | | | |

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| Debtor 1 Belinda | | Plange | Case number (if kno | pwn) |
|---|--|---|--|--|
| First Name | Middle Name | Last Name | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy Ca | ase | | |
| The chapter of the Bankruptcy Code you are choosing to file under | | description of each, see <i>Notice Req</i> | | |
| 8. How you will pay the fee | more details about cashier's check, or may pay with a cred lindividuals to Pay the fell lindividuals to Pay the judge may, but is not the official poverty you choose this opposed in the lindividuals to pay the lindividuals | how you may pay. Typically, if you money order If your attorney is dit card or check with a pre-printere in installments. If you choose Your Filing Fee in Installments (Coree be waived (You may request ot required to, waive your fee, and line that applies to your family significant. | ou are paying the submitting you ed address. ethis option, sign official Form 103 this option only ad may do so onlize and you are used and yo | the clerk's office in your local court for e fee yourself, you may pay with cash, in payment on your behalf, your attorney an and attach the <i>Application for IA</i>). If you are filing for Chapter 7. By law, a sty if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official |
| 9. Have you filed for bankruptcy within the last 8 years? | ✓ No. Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Yes. Debtor District Debtor District | <u>W</u> hen <u>W</u> hen | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to | | - | you want to stay in your residence? St You (Form 101A) and file it with |

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Debtor 1 Belinda Plange Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 Belinda
 Plange
 Case number (if known)

 Last Name

| Part 5: Explain Your Effo | rts to Receive a Brie | efing About Credit Counseling | | |
|---|---|---|--|---|
| | About Debtor 1: | | About Debtor 2 (S | pouse Only in a Joint Case): |
| 15. Tell the court | You must check one: | | You must check one | : |
| whether you have received briefing about credit counseling. | counseling ager | fing from an approved credit ncy within the 180 days before I uptcy petition, and I received a mpletion. | counseling age | fing from an approved credit ncy within the 180 days before I uptcy petition, and I received a impletion. |
| The law requires that you receive a briefing | | the certificate and the payment plan, eveloped with the agency. | | the certificate and the payment plan, eveloped with the agency. |
| about credit counseling before you file for bankruptcy. You must truthfully | counseling ager | fing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a mpletion. | counseling age | fing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a empletion. |
| check one of the following choices. If you cannot do so, you are not eligible to file. | | er you file this bankruptcy petition, copy of the certificate and payment | | fter you file this bankruptcy petition, copy of the certificate and payment |
| If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your | from an approve obtain those ser made my reques | ked for credit counseling services ed agency, but was unable to rvices during the 7 days after I st, and exigent circumstances emporary waiver of the | from an approv obtain those se made my reque | sked for credit counseling services ed agency, but was unable to ervices during the 7 days after I est, and exigent circumstances emporary waiver of the |
| creditors can begin collection activities again. | requirement, attad efforts you made unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this | requirement, atta efforts you made unable to obtain | lay temporary waiver of the ach a separate sheet explaining what to obtain the briefing, why you were it before you filed for bankruptcy, and sumstances required you to file this |
| | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. | | e dismissed if the court is dissatisfied s for not receiving a briefing before cruptcy. |
| | receive a briefing must file a certifica with a copy of the | sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along a payment plan you developed, if any. o, your case may be dismissed. | receive a briefing must file a certific with a copy of the | sfied with your reasons, you must still g within 30 days after you file. You cate from the approved agency, along e payment plan you developed, if any. so, your case may be dismissed. |
| | • | the 30-day deadline is granted only mited to a maximum of 15 days. | • | the 30-day deadline is granted only limited to a maximum of 15 days. |
| | I am not required counseling beca | d to receive a briefing about credit ause of: | I am not require counseling bec | ed to receive a briefing about credit ause of: |
| | ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | Active duty. | I am currently on active military duty in a military combat zone. | Active duty. | I am currently on active military duty in a military combat zone. |
| | about credit coun | are not required to receive a briefing iseling, you must file a motion for ounseling with the court. | about credit cou | u are not required to receive a briefing nseling, you must file a motion for counseling with the court. |

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Debtor 1 Belinda Plange Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Belinda Plange Signature of Debtor 1 Signature of Debtor 2 Executed on _ 10/20/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Belinda | | Plange | Case number (iii | f known) |
|--|----------------------------|-----------------------|-----------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 12 | 2, or 13 of title 11, Unite | nave informed the debtor(s) about ad States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requi | ired by 11 U.S.C. § | 342(b) and, in a case in | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the | information in the sched | dules filed with the petition is incorrect. |
| attorney, you do not | | | | · |
| need to file this page. | /s/ Michael Miller | | Date _ | 10/20/2017 |
| | Signature of Attorney for | or Debtor | | MM / DD / YYYY |
| | , | | | |
| | | | | |
| | Michael Miller | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 20 S. Clark Street | | | |
| | Street | | | |
| | 28th Floor | | | |
| | | | | |
| | Chicago | | Illinois | 60603 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3122568728 | Email address | mmiller@semradlaw.com |
| | | | _ , | |
| | | | Illinois | S |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your c | ase: | |
|---------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Belinda | | Plange |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | - | | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | 40.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$4,647.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$4,647.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$120.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$51,076.00 |
| Your total liabilities | \$51,196.00 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) | |
| The contraction of the contracti | \$1,731.34 |
| Copy your combined monthly income from line 12 of Schedule I | <u> </u> |
| · · · · · · · · · · · · · · · · · · · | \$1,729.00 |

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Debtor 1 Belinda Plange _ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$912.08 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$120.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$120.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | information | on to identify your ca | ase: | | - | | | |
|--|------------------------------------|--|--|----------------------|---|---------------------------|---|--|
| Dalata u 1 | Da | lin do | | | Diagram | | | |
| Debtor 1 | | linda st Name | Middle N | lame | Plange Last Name | | | |
| Debtor 2 | | ot rains | Middle | iamo | Last Hamo | | | |
| (Spouse, if fil | ling) Fire | st Name | Middle N | lame | Last Name | | | |
| United Sta | ates Bankr | ruptcy Court for the: | Northern | | District of Illinois (State) | | | |
| Case num (If known) | nber | | | | (*****) | | | |
| Officia | al Forr | m 106A/B | | | | | | Check if this is an amended filing |
| Sched | dule / | A/B: Prope | rty | | | | | 12/1 |
| category v responsibl write your | where you le for sup name an | u think it fits best. E plying correct inform nd case number (if k | Be as complete a mation. If more s nown). Answer e | nd a pace very | a asset only once. If an asset fits in occurate as possible. If two married is needed, attach a separate sheet question. or Other Real Estate You Own o | people ar t to this fo | e filing together, both a orm. On the top of any a | re equally |
| | | | _ | | | | | |
| | No. Go t | | ultable iliterest i | III ali | y residence, building, land, or simil | ar proper | .y: | |
| <u> </u> | | | | | | | | |
| ш | Yes. wne | ere is the property? | | | | | | |
| | | | | Wh | at is the property? Check all that app | oly. | | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.1 | Street ad | dress, if available, or | other description | Ш | Single-family home | | | nims Secured by Property. |
| | | | • | | Duplex or multi-unit building | | Current value of the | Current value of the |
| | | | - | | Condominium or cooperative | | entire property? | portion you own? |
| | | | | Ц | Manufactured or mobile home | | | |
| | Number | Street | | Ш | Land | | Describe the nature o | f vour ownershin |
| | | | | Ш | Investment property | | interest (such as fee s | |
| | City | State | Zip Code | | Timeshare Other | | the entireties, or a life | e estate), if known. |
| | , | | _p | Wh | o has an interest in the property? C | heck | Check if this is co | mmunity property |
| | | | | one | | | | |
| | | | | | Debtor 1 only | | | |
| | | | | | Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 only | | | |
| | | | | | At least one of the debtors and another | er | | |
| | | | | | ner information you wish to add abo | ut this ite | em, such as local | |
| | | | | pro | perty identification number: | | | |
| If you | own or ha | ave more than one, li | st here: | | | | 5 | |
| 1.2 | | | | wn | at is the property? Check all that app | oly. | | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.2 | Street ad | dress, if available, or | other description | Н | Single-family home | | | ims Secured by Property. |
| | | | | H | Duplex or multi-unit building | | Current value of the | Current value of the |
| | - | | | Ш | Condominium or cooperative Manufactured or mobile home | | entire property? | portion you own? |
| | | | | Н | Land | | | |
| | Number | Street | _ | Н | Investment property | | Describe the nature o | f your ownership |
| | | | | Н | Timeshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | H | Other | | | e estate), il kilowii. |
| | | | | Wh | o has an interest in the property? C | Check | Check if this is co (see instructions) | mmunity property |
| | | | | one | | | | |
| | | | | 닏 | Debtor 1 only | | | |
| | | | | | Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 only | | | |
| | | | | | At least one of the debtors and another | er | | |
| | | | | | ner information you wish to add abo perty identification number: | ut this ite | em, such as local | |

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| | Belinda First Name | Middle Name | Plange Case num | nber (if known) | |
|---------------------|---|--|--|---|---|
| 1.3 <u> </u> | eet address, if available, or ot | | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Nu Cit | mber Street y State | Zip Code | Land Investment property Timeshare Other | Describe the nature or interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Check if this is co (see instructions) | mmunity property |
| 2. Add | d the dollar value of the po | rtion you own for | Other information you wish to add about this ite property identification number: all of your entries from Part 1, including any ent | | |
| you ha | ave attached for Part 1. Wr | | | | |
| Part 2: Do you o | Describe Your Vehicle | | st in any vehicles, whether they are registered o | r not? Include any vehicles | |
| ou own | | • | | • | |
| | | | , also report it on Schedule G: Executory Contracts a rcycles | nd Unexpired Leases. | |
| ✓ Ye 3.1 | o es Make | illity vehicles, moto Hyundai Tucson Utility 4D | who has an interest in the property? Check one. | Do not deduct secured the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | o es Make Model: Year: Approximate mileage: | tility vehicles, moto Hyundai Tucson | rcycles Who has an interest in the property? Check | Do not deduct secured the amount of any secu | ured claims on Schedule D: |
| | o es Make Model: Year: | Hyundai Tucson Utility 4D GLS 2WD 2007 140000 | who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured the amount of any secureditors Who Have Classification Current value of the entire property? \$2525.00 | ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| 3.1 | o es Make Model: Year: Approximate mileage: Other information: | Hyundai Tucson Utility 4D GLS 2WD 2007 140000 | Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured the amount of any secureditors Who Have Classification with the entire property? \$2525.00 Do not deduct secured the amount of any secured the amount of | ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |

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| otor 1 | Belinda First Name | Middle Name | Plange Last Name | Case number | er (if known) | |
|--------|---|-------------|--|--|---|--|
| 3.3 | Make Model: Year: | | Who has an interest in the prone. | roperty? Check | the amount of any secu | claims or exemptions. Pured claims on Schedule in the secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only | , | Current value of the entire property? | Current value of the portion you own? |
| | | | At least one of the debtors Check if this is communit instructions) | | | |
| 3.4 | Make Model: Year: Approximate mileage: | | Who has an interest in the prone. Debtor 1 only Debtor 2 only | operty? Check | the amount of any secu Creditors Who Have Cla | claims or exemptions. Pured claims on Schedule in Secured by Property |
| | Other information: | | Debtor 1 and Debtor 2 only | | Current value of the entire property? | Current value of the portion you own? |
| | | | At least one of the debtors Check if this is community | | | |
| Exar | nples: Boats, trailers, motors | • | instructions) er recreational vehicles, other v , fishing vessels, snowmobiles, m | • | | |
| Exar | nples: Boats, trailers, motors No Yes | • | er recreational vehicles, other v | otorcycle accessori | Do not deduct secured the amount of any secu | claims or exemptions. Prized claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make | • | er recreational vehicles, other v , fishing vessels, snowmobiles, m Who has an interest in the pr | otorcycle accessori | Do not deduct secured the amount of any secu | red claims on Schedule |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the prone. Debtor 1 only Debtor 2 only | otorcycle accessori roperty? Check , , and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | • | who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is community | roperty? Check and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. P hered claims on Schedule |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors instructions) Who has an interest in the prone. | roperty? Check and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Property Current value of the |

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| D | ebtor 1 | Belinda First Name | Middle Name | Plange Last Name | Case number (if known) | |
|----------|--------------------------------|---|---|---------------------------------------|----------------------------------|--|
| Pa | art 3: | | our Personal and Household It | | | |
| | | | re any legal or equitable interes | | g items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | _ | and furnishings diances, fumiture, linens, china, kitchen | nware | | |
| | No | | | | | 1 |
| ✓ | Yes. I | Describe | Used Furniture | | | \$400.00 |
| | 7. Elect Examp No | | s and radios; audio, video, stereo, and | I digital equipment; compute | ers, printers, scanners; music | |
| ✓ | Yes. D | Describe | (1)TV (1)Cellphone (1)Laptop | | | \$400.00 |
| | Examp No | | lue and figurines; paintings, prints, or othe pin, or baseball card collections; other c | | = |] |
| | Examp | les: Sports, pl | orts and hobbies notographic, exercise, and other hobby s; carpentry tools; musical instruments | · · · · · · · · · · · · · · · · · · · | tables, golf clubs, skis; canoes | |
| | | | les, shotguns, ammunition, and related | d equipment | | |
| ⊻ | No | | | | | 7 |
| | Yes. [| Describe | | | | |
| | I 1. Clo t Examp | | clothes, furs, leather coats, designer w | ear, shoes, accessories | | 1 |
| ✓ | Yes. [| Describe | Used Clothes | | | \$600.00 |
| | I 2. Jew Examp | - | jewelry, costume jewelry, engagement er | rings, wedding rings, heirlo | om jewelry, watches, gems, | |
| ✓ | Yes. [| Describe | Used Jewelry | | | \$100.00 |
| | Examp No | n-farm animal les: Dogs, cat Describe | s, birds, horses | | | |
| ш | I | | | | | |
| _ | I 4. Any No | other persor | nal and household items you did not | t already list, including an | ny health aids you did not list | |
| | | Describe | | | | 1 |
| Ш | l les. L | Describe | | | | |
| | | | alue of all of your entries from Part 3 | 3, including any entries fo | or pages you have attached | \$1500.00 |

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Debtor 1 Belinda Plange Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$100.00 17.1. Checking account: Chase Bank <u>\$</u>1.00 17.2. Checking account: Chime 17.3. Checking account: greend dot pre paid debit card \$1.00 17.4. Savings account: 17.5. Savings account: 17.6. Certificates of deposit: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 17.10. Other financial account: Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

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| Deb | tor 1 Belinda First Name | Middle Name | Plange Last Name | Case number (if known) | |
|-----|--|---|--|---|---------------|
| 20. | Government and corpo Negotiable instruments i | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfe | ole and non-negotiabl checks, promissory no | ites, and money orders. | |
| | ✓ No Yes. Give specific information about them | Issuer name: | | | |
| 21. | Retirement or pension Examples: Interests in IF | | , thrift savings account | s, or other pension or profit-sharing plans | |
| | No No List each | Type of account: | Institution name: | | |
| | ✓ Yes. List each account | 401(k) or similar plan: | 401K through Emplo | yer | \$500.00 |
| | separately. | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | - |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | - |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | _ | or a periodic payment of money to | you, either for life or fo | r a number of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | - |
| | | | | | |

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| Debt | tor 1 Belinda First Name | M: alalla | Plange | Case number (if known) | |
|------|--|---|---|--|--|
| 24. | | Middle education IRA, in an acc | Name Last Name count in a qualified ABLE program, or unde | er a qualified state tuition program. | |
| | | 0(b)(1), 529A(b), and 529 | | , | |
| | ✓ No Yes | stitution name and descri | ption. Separately file the records of any interest | ts.11 U.S.C. § 521(c): | |
| | _ | | | | - |
| | - | | | | |
| 25. | Trusts, equitab exercisable for | | property (other than anything listed in line | 1), and rights or powers | |
| | No Yes. Describ | ۵ | | | |
| | Tes. Describ | | | | |
| 26. | | = ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | secrets, and other intellectual property | omente | |
| | No No | et domain names, websit | es, proceeds from royalities and ficensing agree | silients | |
| | Yes. Describ | e | | | |
| | | | | | |
| 27. | | hises, and other general ng permits, exclusive licen | l intangibles ses, cooperative association holdings, liquor li | icenses, professional licenses | |
| | ✓ No | | | | |
| | Yes. Describ | e | | | |
| | | | | | |
| | | | | | |
| Mor | ney or property | owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or property | | | | portion you own? |
| | Tax refunds owe | d to you | | | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owe | | 2016 Tax Refund | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owe No Yes. Give spr about t you alre | ed to you | 2016 Tax Refund | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owe No Yes. Give spr about t you alre and the | ed to you ecific information hem, including whether eady filed the returns | 2016 Tax Refund | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owe No Yes. Give spr about t you alre and the | ecific information hem, including whether eady filed the returns tax years | 2016 Tax Refund spousal support, child support, maintenance, | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$20.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give sprabout tyou alreand the Family support Examples: Past d | ecific information hem, including whether eady filed the returns tax years | | State: Local: divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$20.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give sprabout tyou alreand the Family support Examples: Past d | ecific information hem, including whether eady filed the returns tax years | | State: Local: divorce settlement, property settlemen Alimony: | portion you own? Do not deduct secured claims or exemptions. \$20.00 \$0.00 \$0.00 t |
| 28. | Tax refunds owe No Yes. Give sprabout tyou alreand the Family support Examples: Past d | ecific information hem, including whether eady filed the returns tax years | | State: Local: divorce settlement, property settlemen Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$20.00 \$0.00 t \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give sprabout tyou alreand the Family support Examples: Past d | ecific information hem, including whether eady filed the returns tax years | | State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$20.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owe No Yes. Give sprabout tyou alreand the Family support Examples: Past d | ecific information hem, including whether eady filed the returns tax years | | State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: | \$20.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owe No Yes. Give speabout to you alread the second that the second term is and the second term is a second to second term is a second to second term is a second te | ecific information hem, including whether eady filed the returns tax years | | State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$20.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owe No Yes. Give spreadout to you alread the second t | ecific information hem, including whether eady filed the returns tax years ue or lump sum alimony, secific information | | State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$20.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owe No Yes. Give speabout to you alread the second the second the second text of the second tex | ecific information hem, including whether eady filed the returns tax years ue or lump sum alimony, ecific information | spousal support, child support, maintenance, | State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$20.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owe No Yes. Give speabout to you alread the second the second text of the se | ecific information hem, including whether eady filed the returns tax years ue or lump sum alimony, ecific information | spousal support, child support, maintenance, | State: Local: divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$20.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Belinda | | Plange | Case number (if known) | |
|------|---|---------------------------|--|--|--|
| | First Name | Middle Nam | e Last Name | | |
| 31. | Interests in insurance paramples: Health, disabil | | ealth savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | Yes. Name the insura of each policy and list | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | | of a living trust, expect | n someone who has died proceeds from a life insurance polic | y, or are currently entitled to receive | |
| | Yes. Describe | | | | |
| 33. | Examples: Accidents, em | | you have filed a lawsuit or made surance claims, or rights to sue | a demand for payment | |
| 0.4 | Yes. Describe | | f in all all an annual and | | |
| 34. | to set off claims | iniiquidated ciaims d | f every nature, including counterd | claims of the debtor and rights | |
| | Yes. Describe | | | | |
| 35. | Any financial assets yo | u did not already list | | | |
| | Yes. Describe | | | | |
| 36. | | - | om Part 4, including any entries fo | | \$622.00 |
| Part | 5: Describe Any Bu | siness-Related Pr | operty You Own or Have an Ir | nterest In. List any real estate in Par | t 1. |
| 37. | Do you own or have any | / legal or equitable in | nterest in any business-related pr | operty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or | commissions you al | ready earned | | |
| | Yes. Describe | | | | |
| 39. | Office equipment, furni Examples: Business-relat | | e, modems, printers, copiers, fax ma | achines, rugs, telephones, desks, chairs, elec | tronic devices |
| | No Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Belinda | | umber (if known) | |
|--------|--------------------------------|--|----------------------|-----------------------------|
| 1.0 | First Name | Middle Name Last Name | | |
| 40. | Machinery, fixtures, equ | ipment, supplies you use in business, and tools of your trade | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 44 | Incomplete to | | | |
| 41. | Inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 40 | | | | |
| 42. | Interests in partnership | s or joint ventures | | |
| | ✓ No | Name of entity: | % of ownership: | |
| | Yes. Give specific | Name of entity. | 70 Of Ownership. | |
| | information about them | | _ | |
| | шеш | | | |
| | | | | |
| 40 | | | _ | |
| 43. | Customer lists, mailing li | sts, or other compilations | | |
| | ✓ No | | | |
| | Yes. Do your lists inc | lude personally identifiable information (as defined in 11 U.S.C. § 101(41A) |)? | |
| | — No | | | |
| | No No | _ | | |
| | Yes. Describ | e | | |
| 44. | Any business-related pr | operty you did not already list | | |
| | — | | | |
| | No | | | |
| | Yes. Give specific information | | | |
| | imormation | | - | - |
| | | | | <u> </u> |
| | | | | |
| | | | | |
| | | | | - |
| | | | | <u> </u> |
| | | | | |
| | | of your entries from Part 5, including any entries for pages you have | | |
| for Pa | art 5. Write that number | here | | |
| Pari | Describe Any Far | m- and Commercial Fishing-Related Property You Own or F | lave an Interest In. | |
| I all | | terest in farmland, list it in Part 1. | | |
| 46. | Do you own or have any | legal or equitable interest in any farm- or commercial fishing-relate | d property? | |
| | | , | | urrent value of the |
| | No. Go to Part 7. | | po | ortion you own? |
| | Yes. Go to line 47. | | | o not deduct secured claims |
| 47 | Farm animals | | Oi | r exemptions |
| 47. | Examples: Livestock, pour | ltry, farm-raised fish | | |
| | | • | | |
| | No No Describe | | | |
| | Yes. Describe | | | |
| | | | | |

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| Deb | | Plange | Case number (if known) | |
|--------------|---|-------------------------|------------------------------|-------------|
| | | _ast Name | | |
| 48. | Crops-either growing or harvested | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 40 | Form and fishing aguinment implements machinery fixture | oo and tools of trade | | |
| 49. | Farm and fishing equipment, implements, machinery, fixture | es, and tools of trade | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 50. | Farm and fishing supplies, chemicals, and feed | | | |
| | | | | |
| | Von Describe | | | |
| | Yes. Describe | | | |
| | | | | |
| 51. | Any farm- and commercial fishing-related property you did | not already list | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | F | |
| 52. A | dd the dollar value of all of your entries from Part 6, includin | g any entries for pages | s you have attached | |
| for Pa | art 6. Write that number here | | | |
| | | | | - |
| | | | | |
| | Book to All Book Live Committee | | | |
| Part | | | NOT LIST ADOVE | |
| 53. | Do you have other property of any kind you did not already I Examples: Season tickets, country club membership | ist? | | |
| | | | | |
| | | | | |
| | Yes. Give specific information | | | |
| | | | | |
| | | | | |
| - 4 . | dd the deller relice of all of comments of from Dant 7. Write th | . t | | |
| 54. A | dd the dollar value of all of your entries from Part 7. Write th | at number nere | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Part | 8: List the Totals of Each Part of this Form | | | |
| | | | | |
| 55. | Part 1: Total real estate, line 2 | | | |
| 56 | part 2 total vehicles, line 5 | | | |
| | | \$2525.00 | - | |
| 57. F | Part 3: Total personal and household items, line 15 | \$1500.00 | _ | |
| 58. F | Part 4: Total financial assets, line 36 | \$622.00 | | |
| 59. | Part 5: Total business-related property, line 45 | | - | |
| | | | - | |
| | Part 6: Total farm- and fishing-related property, line 52 | | - | |
| 61. | Part 7: Total other property not listed, line 54 | | _ | |
| 62. | Total personal property. Add lines 56 through 61 | \$4647.00 | | + \$4647.00 |
| | | + | Copy personal property total | |
| | | | | \$4647.00 |
| 63. T | otal of all property on Schedule A/B. Add line 55 + line 62 | | | Ψ-1.00 |

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| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Belinda | | Plange | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (Giate) | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | t 1: Identify the Property You Clair | m as Exempt | | | | | | |
|----|---|--|---|------------------------------------|--|--|--|--|
| 1. | Which set of exemptions are you claim | ing? Check one only, ev | ven if your spouse is filing with you. | | | | | |
| | You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | | |
| | You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(| 2) | | | | | |
| 2. | For any property you list on Schedule A | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | |
| | Brief description: Checking account, Chase Bank Line from Schedule A/B: 17 | \$100.00 | \$100.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | |
| | Brief description: | \$1.00 | 7 | 735 ILCS 5/12-1001(b) | | | | |
| | Checking account, Chime | | \$1.00 100% of fair market value, up to any | _ | | | | |
| | Line from Schedule A/B: 17 | | applicable statutory limit | | | | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) within 1,215 days before you filed this case? | | | | | |

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Debtor 1 Belinda Plange Case number (if known)
First Name Middle Name Last Name

| Copy the value from Schedule A/B \$400.00 | \$400.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
|---|---|--|
| \$400.00 | 100% of fair market value, up to any | 735 ILCS 5/12-1001(b) |
| \$400.00 | 100% of fair market value, up to any | _ |
| | | |
| | applicable statutory little | |
| **** | | 735 ILCS 5/12-1001(a) |
| \$600.00 | \$600.00 | |
| | 100% of fair market value, up to any applicable statutory limit | _ |
| | | 735 ILCS 5/12-1001(b) |
| \$400.00 | \$400.00 | |
| | 100% of fair market value, up to any | _ |
| | applicable statutory limit | |
| ¢500.00 | | 735 ILCS 5/12-1006 |
| φ300.00 | \$500.00 | _ |
| | 100% of fair market value, up to any | |
| | applicable statutory limit | |
| ¢100.00 | _ | 735 ILCS 5/12-1001(b) |
| \$100.00 | \$100.00 | |
| | 100% of fair market value, up to any applicable statutory limit | _ |
| \$2.525.00 | | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |
| | \$2,400.00, \$125.00 | |
| | applicable statutory limit | |
| | | |
| \$20.00 | | 735 ILCS 5/12-1001(b) |
| | \$20.00 | _ |
| | applicable statutory limit | |
| | | 735 ILCS 5/12-1001(b) |
| \$1.00 | \$1.00 | |
| | 100% of fair market value, up to any | _ |
| | \$500.00 \$100.00 \$2,525.00 \$20.00 | \$600.00 100% of fair market value, up to any applicable statutory limit \$400.00 \$400.00 100% of fair market value, up to any applicable statutory limit \$500.00 \$500.00 100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$2,525.00 \$2,400.00; \$125.00 100% of fair market value, up to any applicable statutory limit \$20.00 \$20.00 \$100% of fair market value, up to any applicable statutory limit |

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| | | | | <u></u> | | |
|---------------------------|----------------------------------|-------------------------------|--|---|--|------------------------------------|
| Fill in this info | ormation to identify your ca | ase: | | | | |
| Debtor 1 | Belinda | | Plange | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case number (If known) | | | | | | |
| Official | Form 106D | | | _ | | Check if this is an amended filing |
| Sched | ule D: Credit | ors Who Ha | ve Claims Secur | ed by Prop | erty | 12/15 |
| more space is | | | e are filing together, both are equinber the entries, and attach it to | | | |
| 1. Do any | creditors have claims s | ecured by your proper | ty? | | | |
| ✓ No. | Check this box and subr | nit this form to the court v | with your other schedules. You ha | ve nothing else to repo | ort on this form. | |
| Yes | s. Fill in all of the informatio | n below. | | | | |
| Part 1: Lis | t All Secured Claims | | | | | |
| for each | | ditor has a particular claim, | red claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports | Column C Unsecured portion If any |

this claim

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| | | Do | cument Page 23 of | 71 | | | |
|---|--|--|--|---|--|--|--|
| Fill in this info | ormation to identify your case: | | | | | | |
| Debtor 1 | Belinda First Name | Middle Name | Plange Last Name | | | | |
| Debtor 2 (Spouse, if filing) | | Middle Name | Last Name | | | | |
| United States | Bankruptcy Court for the: Northern | l . | District of Illinois(State) | | | | |
| Case number (If known) | | | (State) | | | | |
| Official F | Form 106E/F | | | <u> </u> | Chec | ck if this is an | amended filing |
| Sched | ule E/F: Credito | rs Who | Have Unsecure | ed Claims | | | 12/15 |
| other party to Form 106A/B claims that a the entries in known). | te and accurate as possible. Use For any executory contracts or unexpland on Schedule G: Executory Correlisted in Schedule D: Creditors In the boxes on the left. Attach the Cott All of Your PRIORITY Unsections In the International Internati | oired leases tha ontracts and Un Who Hold Claim Continuation Pa | t could result in a claim. Also lis expired Leases (Official Form 10 s Secured by Property. If more s | t executory contract 6G). Do not include a pace is needed, copy | s on <i>Schedu</i> any creditors the Part yo | le A/B: Prop s with partia u need, fill it | erty (Official Ily secured t out, number |
| _ | creditors have priority unsecured of Go to Part 2. | claims against y | you? | | | | |
| listed, id As much Continus | of your priority unsecured claims. entify what type of claim it is. If a clain as possible, list the claims in alphabation Page of Part 1. If more than one explanation of each type of claim, see | m has both prior etical order accor e creditor holds a | ity and nonpriority amounts, list that ding to the creditor's name. If you particular claim, list the other credit | t claim here and show have more than two p ors in Part 3. | both priority | and nonprior | rity amounts. |
| · | | | | | Total claim | Priority amount | Nonpriority amount |
| 2.1 IRS | Creditor's Name | | Last 4 digits of account number | | \$120.00 | \$120.00 | \$0.00 |
| Po Box | x 64338 | | When was the debt incurred? | n/a | | | |
| Numbe | er Street | | As of the date you file, the claim apply. | is: Check all that | | | |
| Chicag | o Illinois 60 | 664 | Contingent | | | | |
| City | State Zip | Code | Unliquidated | | | | |
| | ncurred the debt? Check one. abtor 1 only | | Disputed | | | | |
| | ebtor 2 only | | Type of PRIORITY unsecured cla | im: | | | |
| | ebtor 1 and Debtor 2 only | | Domestic support obligations | | | | |
| At | least one of the debtors and another | | Taxes and certain other debts government | ou owe the | | | |
| CH | neck if this claim relates to a comi | munity debt | Claims for death or personal in intoxicated | jury while you were | | | |
| Is the | claim subject to offset? | | Other Specify | | | | |

Yes

Other. Specify ___

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Plange Debtor 1 Belinda Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 AmeriCash Loans \$400.00 Last 4 digits of account number Nonpriority Creditor's Name 1801 Dempster St When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60201 Illinois Evanston City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **✓** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ____ payday loan Is the claim subject to offset? Yes AT&T 4.2 \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 105262 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 30348 Atlanta Georgia City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ phone bill Is the claim subject to offset? **✓** No Yes 4.3 City of Chicago - Parking and red Light Tickets \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Chicago Illinois City Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **✓** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ DL#: P452-0609-5781 Is the claim subject to offset? **✓** No Offician Yes Schedule E/F: Creditors Who Have Unsecured Claims page 2

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| Part 2 | Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page | | | | | |
|--------|---|---|-------------|--|--|--|
| | After listing any entries on this page, number them beginning wit | th 4.5, followed by 4.6, and so forth. | Total claim | | | |
| 4.4 | DISCOVER FIN SVCS LLC | Last 4 digits of account number 1770 | \$581.00 | | | |
| | Nonpriority Creditor's Name PO BOX 15316 | When was the debt incurred? 6/2015 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | WILMINGTON Delaware 19850 City State Zip Code | Unliquidated | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Is the claim subject to offset? | Other. Specify CreditCard | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.5 | Exeter Finance LLC Nonpriority Creditor's Name | Last 4 digits of account number1001 | \$30,268.00 | | | |
| | PO BOX 166097 | When was the debt incurred? 7/2016 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | IRVING Texas 75016 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a community debt | debts Other Specify Penn & Surrender to Vehicle | | | | |
| | Is the claim subject to offset? | Other. Specify Repo & Surrender to Vehicle | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.6 | Illinois Tollway | Last 4 digits of account number | \$2,000.00 | | | |
| | Nonpriority Creditor's Name 2700 Ogden Ave | When was the debt incurred? | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | Legal Dept | Contingent | | | | |
| | Davis and Oracia Ulinaia COSAS | Unliquidated | | | | |
| | Downers Grove Illinois 60515 City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 1 only | Student loans | | | | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | | | | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Check if this claim relates to a community debt | PL#: Q7113557, Other. Specify Q0616220,AM62164 | | | | |
| | Is the claim subject to offset? | Q0010220, AWI02104 | | | | |
| | Yes | | | | | |

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Debtor 1 Belinda Plange Case number (It known)

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

| rait 2 | | | |
|--------|---|---|-------------|
| | After listing any entries on this page, number them begin | nning with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | PayPal Credit | Last 4 digits of account number | \$700.00 |
| | Nonpriority Creditor's Name | | |
| | PO Box 105658 Number Street | When was the debt incurred?n/a | |
| | Number Succe | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | All . | Unliquidated | |
| | Atlanta Georgia 30348 City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | 느 | Obligations arising out of a separation agreement or | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specify credit card | |
| | Is the claim subject to offset? | _ | |
| | ✓ No | | |
| | Yes | | |
| 4.8 | PLS Loan Store | | \$700.00 |
| 7.0 | Nonpriority Creditor's Name | Last 4 digits of account number | Ψ7 00.00 |
| | 7001 N Clark St Number Street | When was the debt incurred?n/a | |
| | Trumboi Guode | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Ohioana Ohioana COCOC | Unliquidated | |
| | ChicagoIllinois60626CityStateZip Code | Disputed | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 only Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | Other. Specifypayday loan | |
| | Is the claim subject to offset? | <u> </u> | |
| | ✓ No | | |
| | Yes | | |
| _ | | | |
| 4.9 | RENTRECOVERY Nonpriority Creditor's Name | Last 4 digits of account number 8177 | \$3,541.00 |
| | 2814 SPRING RD STE 301 | When was the debt incurred? 6/2017 | |
| | Number Street | As of the date year file, the eleips in Check all that apply | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | ATLANTA Georgia 30339 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | <u> </u> | Student loans | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | 片 | debts | |
| | Check if this claim relates to a community debt | Collecting for ORIGINAL CREDITOR: 09 VILLAGE AT LAKE | |
| | Is the claim subject to offset? | Other. Specify PARK | |
| | ✓ No | | |
| | Yes | | |

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Plange Debtor 1 Belinda Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 SCANA ENERGY MARKETING \$149.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/2017 220 Operation Way, MC 222 Street As of the date you file, the claim is: Check all that apply. Contingent Cayce South Carolina 29033 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ 001 InstallmentLoan Is the claim subject to offset? Yes 4.11 TIDEWATER MOTOR CREDIT \$10,637.00 Last 4 digits of account number Nonpriority Creditor's Name 7/2016 6520 INDÍAN RIVER RD When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated VIRGINIA BEACH Virginia 23464 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Repo & Surrender to Vehicle Is the claim subject to offset? **✓** No Yes VERIZON WIRELESS 4.12 \$500.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 4002 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 30101 Acworth Georgia Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify __ phone bill Is the claim subject to offset?

✓ No Yes

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| Debtor | 1 Belinda First Name Middle Name | Plange Last Name | Case number (if known) | | | | |
|---------|--|-----------------------|---|-------------|--|--|--|
| Part 2: | Your NONPRIORITY Unsecured Claim | ims - Continuation | Page | | | | |
| | After listing any entries on this page, numb | er them beginning wit | th 4.5, followed by 4.6, and so forth. | Total claim | | | |
| | Village of Crestwood Nonpriority Creditor's Name 13840 S. Cicero Crestwood Number Street | | Last 4 digits of account number \$100.00 When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. | | | | |
| | Midlothian Illinois 60445 City State Zip Code | | Contingent Unliquidated Disputed | | | | |
| | Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | | | | |
| | Check if this claim relates to a commu Is the claim subject to offset? No Yes | nity debt | debts ✓ Other. SpecifyDL#: P452-0609-5781 | | | | |

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Debtor 1 Belinda Plange Case number (if known) Middle Name First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Village at Lake Park On which entry in Part 1 or Part 2 did you list the original creditor? Name Line 4.9 of (Check 2085 Lake Park Drive SE Part 1: Creditors with Priority Unsecured Claims Street one): Number Part 2: Creditors with Nonpriority Unsecured 30080 Smyrna Georgia Last 4 digits of account number 8177 City State Zip Code HARRIS & HARRIS LTD On which entry in Part 1 or Part 2 did you list the original creditor? 111 W JACKSON BLVD S-400 Line 4.3 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured CHICAGO Illinois 60604 Last 4 digits of account number

City

State

Zip Code

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Debtor 1 Belinda Plange Case number (if known)

| FIRST INS | ime Middle Name Last Name | | | |
|--------------------------|---|---------|-----------------------|--------|
| Part 4: Add t | he Amounts for Each Type of Unsecured Claim | | | |
| | amounts of certain types of unsecured claims. This information is mounts for each type of unsecured claim. | s for s | statistical reporting | purpos |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$120.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | | \$0.00 | |
| | amount here. | | \$120.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$51,076.00 | |
| | 6i Total Add lines 6f through 6i | 6i | \$51,076.00 | |

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| Fill in this infor | mation to identify your c | ase: | |
|---------------------------|---------------------------|-------------|------------------------------|
| Debtor 1 | Belinda | | Plange |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) |
| Case number (If known) | | | () |

Official Form 106G

| П | Check if this is an |
|---|---------------------|
| | amended filing |

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or comp | any with whom you have t | the contract or lease | State what the contract or lease is for | |
|-----|---------------------|--------------------------|-----------------------|---|--|
| 2.1 | BRIDGECREST Name | | | Auto Lease, Debtor is Lessee. | |
| | PO BOX 29018 | | | Lease on 2007 Hyundai Tucson Utility 4D GLS 2WD | |
| | Number | Street | | | |
| | PHOENIX | Arizona | 85038 | | |
| | City | State | Zip Code | | |

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| | | | Do | cument rage | C 32 01 7 1 |
|------------|----------------|---------------------------|---|-----------------------------|--|
| Fill in | this infor | mation to identify your c | ase: | | |
| Debt | or 1 | Belinda | | Plange | |
| | | First Name | Middle Name | Last Name | |
| Debt | | = | | | |
| (Spou | se, if filing) | First Name | Middle Name | Last Name | |
| Unite | ed States E | ankruptcy Court for the: | Northern | District of Illinois | |
| Case | number | | | (State) | |
| (If kno | | | | | |
| 1 | | | | | Check if this is an |
| ~ | | | | | amended filing |
| Off | ticial | Form 106H | | | |
| Cal | dl | . II. V C | lablana | | |
| <u>Scr</u> | neaui | e H: Your Cod | ieptors | | 12/15 |
| know | n). Answe | r every question. | tach the Additional Page | | op of any Additional Pages, write your name and case number (if a codebtor.) |
| | | | lived in a community pro kico, Puerto Rico, Texas, W | | ? (Community property states and territories include Arizona, California, in.) |
| | ✓ No. (| Go to line 3. | | | |
| | | • • | er spouse, or legal equiva | lent live with you at the t | time? |
| | ✓ | No | | | |
| | | Yes. In which communit | y state or territory did you | ı live? | Fill in the name and current address of that person. |
| | | | | | |
| | | Name of your spouse, f | ormer spouse, or legal equ | valent | |
| | | Number Street | | | |
| | | Namber Succi | | | |
| | | City | State | Zip Co | ode |
| | | | | • | |
| 3. I | In Column | 1, list all of your codel | otors. Do not include you | spouse as a codebtor | r if your spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | | | 9 | | | |
|--|------------------------------------|---|--|-------------------|------------------------|---|--------------------|
| Fill in this informa | ation to identify | your case: | | | | | |
| | inda | | Plange | | _ | | |
| _ | t Name | Middle Name | Last N | ame | Che | ck if this is: | |
| Debtor 2 (Spouse, if filing) Firs | t Name | Middle Name | Last N | ame | — I п | An amended filing | |
| | | | | | | A supplement showing post- | petition chapter 1 |
| United States Bank the: | truptcy Court for | Northern | District of Illi | nois State) | | expenses as of the following | |
| Case number | | | (C | natoj | | | |
| (If known) | | | | | | MM / DD / YYYY | |
| Official Fo | rm 106I | | | | | | |
| Schedule I | : Your In | come | | | | | 12/1 |
| information about spouse. If more s number (if known | t your spouse. I pace is needed | f you are separated and , attach a separate she y question. | d your spous | se is not filing | g with you, do | r spouse is living with yo not include information a onal pages, write your n | about your |
| 1. Fill in your emp | oloyment | | Debtor 1 | | | Debtor 2 | |
| information. | | Forth contract of | | | | | |
| If you have mor | • | Employment status | ✓ Emplo | • | | Employed | |
| attach a separate information abo | | | Not Er | nployed | | Not Employed | |
| employers. | at additional | Occupation | | | | | |
| Include part time self-employed w | | Employer's name | pployer's name Titan Security Services, Ir | | | | |
| Occupation may | / include student | Employer's address | | Monroe St. | | | |
| or homemaker, | | | Number Str | reet | | Number Street | |
| | | | - | | 00001 | | |
| | | | Chicago City | Illinois State | 60661 Zip Code | City State | Zip Code |
| | | How long employed | 1 month | | P | , | , |
| | | there? | | | | | |
| Part 2: Give Do | etails About M | Ionthly Income | | | | | |
| F. C | | | . 16 | | . I farra Par | ''- Φ0 '- II II- I- | - Cl |
| spouse unless you | are separated. | | | | | write \$0 in the space. Include | |
| If you or your non- more space, attac | | | combine the | information for | all employers fo | or that person on the lines be | low. If you need |
| | | | | For | Debtor 1 | For Debtor 2 or non-filing spouse | |
| | | | | | | | |
| | | ary, and commissions (before calculate what the monthly was | | 2. | \$1,503.15 | | |
| deductions.) I be. | | calculate what the monthly v | | 3. | \$1,503.15 + \$0.00 | | |

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| Debtor 1Belinda | Plange | | Case numbe | | |
|--|--|-------------|-----------------------|-----------------------------------|-------------------------|
| First Name Mic | dle Name Last Nam | ie . | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | → | 4. | \$1,503.15 | | |
| 5. List all payroll deductions: | | | | | |
| 5a. Tax, Medicare, and Social Security of | deductions | 5a. | \$271.81 | | |
| 5b. Mandatory contributions for retirem | ent plans | 5b. | \$0.00 | | |
| 5c. Voluntary contributions for retireme | nt plans | 5c. | \$0.00 | | |
| 5d. Required repayments of retirement | fund loans | 5d. | \$0.00 | | |
| 5e. Insurance | | 5e. | \$0.00 | | |
| 5f. Domestic support obligations | | 5f. | \$0.00 | | |
| 5g. Union dues | | 5g. | \$0.00 | | |
| 5h. Other deductions. Specify: | | 5h. + | \$0.00 | · | |
| 6. Add the payroll deductions. Add lines 5a +5h. | + 5b + 5c + 5d + 5e +5f + 5g | 6. | \$271.81 | | |
| 7. Calculate total monthly take-home pay. | Subtract line 6 from line 4. | 7. | \$1,231.34 | | |
| 8. List all other income regularly received: | | | | | |
| 8a. Net income from rental property and business, profession, or farm Attach a statement for each property an | . • | | | | |
| gross receipts, ordinary and necessary the total monthly net income. | · · | 8a. | \$0.00 | | |
| 8b. Interest and dividends | | 8b. | \$0.00 | | |
| 8c. Family support payments that you, a dependent regularly receive | non-filing spouse, or a | | | | |
| Include alimony, spousal support, child divorce settlement, and property settlen | | 8c. | \$0.00 | | |
| 8d. Unemployment compensation | | 8d. | \$0.00 | | |
| 8e. Social Security | | 8e. | \$0.00 | | |
| 8f. Other government assistance that you Include cash assistance and the value (in cash assistance that you receive, such a under the Supplemental Nutrition Assist housing subsidies Specify: | f known) of any non- as food stamps (benefits | O.F | \$0.00 | | |
| 8g. Pension or retirement income | , | 8f. 8g. | \$0.00 | | |
| 8h. Other monthly income. Specify: See | attached | 8h. + | \$500.00 - | | |
| 9. Add all other income Add lines 8a + 8b + | | 9. [| \$500.00 | | |
| o. Maa an other moome had miss out too t | oo rou roo rorrog rom. | ν. [| ψ300.00 | | |
| 10. Calculate monthly income. Add line 7 + Add the entries in line 10 for Debtor 1 and | | 10. | \$1,731.34 | + | = \$1,731.34 |
| 11. State all other regular contributions to Include contributions from an unmarried prifriends or relatives. Do not include any amounts already include | artner, members of your househ | old, your | lependents, your room | | |
| Specify: | So E o or amounto tha | u | | | 11. + \$0.00 |
| | | | | | |
| 12. Add the amount in the last column of li Write that amount on the <i>Summary of Sch</i> | | | | | 12. \$1,731.34 |
| | | | | | Combined monthly income |
| 13. Do you expect an increase or decrease | within the year after you file | this form | ? | | |
| ✓ No. | | | | | |
| Yes. Explain: | | | | | |
| | | | | | |

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| Debtor 1Belinda | | Plange | | Case number (if | |
|--------------------------|-------------------|-----------|----------|---------------------|---|
| First Name | Middle Name | Last Name | е | known) | |
| Part 1: Describe Employm | ent | | | | |
| | Debtor 1 | | | Debtor 2 | |
| Employment status | ✓ Employed | | | Employed | _ |
| | Not Employed | l | | Not Employed | |
| Occupation | | | | | |
| Employer's name | Uber | | | | |
| Employer's address | 7584 Creekside La | ane | | | |
| | Number Street | | | Number Street | |
| | | | | | |
| | Riverdale | Georgia | 30296 | | |
| | City | State | Zip Code | City State Zip Code | — |
| How long employed there? | | | , | | |

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Debtor 1 Belinda Plange Case number (if known)

Part 2: Give Details About Monthly Income

Official Form 106l. Additional page.

For Debtor 1 For Debtor 2 or non-filling spouse

8h.Other monthly income. Specify:

1. Uber \$500.00

Official Form 106l Schedule I: Your Income page 4

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| | | Doci | ument Page 37 of 7 | L | | |
|---------------------------------|--|---|---|-------------------|--------------------------------------|-------------|
| Fill in this infor | mation to identify your c | ase: | | | | |
| Debtor 1 | Belinda | | Plange | | | |
| Dalata a 0 | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filin | g | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois (State) | | owing post-petitione following date: | • |
| Case number (If known) | | | (Citally) | MM / DD / YYYY | | |
| Official | Form 106J | | | | | |
| | e J: Your Exp | enses | | | | 12/15 |
| information. If I | | attach another sheet to this | are filing together, both are equal s form. On the top of any addition | | | ımber |
| 1. Is this a join | | | | | | |
| ✓ No. Go | to line 2 | | | | | |
| Yes. Do | oes Debtor 2 live in a se | parate household? | | | | |
| _ г | No | | | | | |
| Ē | Yes. Debtor 2 must file | e Official Forms 106J-2, <i>Expe</i> | enses for Separate Household of Deb | tor 2. | | |
| 2. Do you have | e dependents? |)) | | | | |
| Do not list D Debtor 2. | ebtor 1 and Ye | es. Fill out this information for ach dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depende with you? | ent live |
| | enses include f people other | 0 | | | | |
| than | Va | | | | | |
| yourself and dependents | your | | | | | |
| Part 2: Estir | mate Your Ongoing I | Monthly Expenses | | | | |
| | of a date after the bank | | you are using this form as a supp pplemental Schedule J, check th | | | |
| | | ash government assistance t on Schedule I: Your Income | | | You | ır expenses |
| | or home ownership export the ground or lot. 4. | penses for your residence. I | nclude first mortgage payments and | | 4. | \$400.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real es | state taxes | | | | 4a | \$0.00 |

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Belinda Plange Case number (if known)
First Name Middle Name Last Name

| FIISUNAINE | Mildule Name Last Name | | |
|--|---|------------|---------------|
| | | | Your expenses |
| 5. Additional mortgage payments for | or your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural gas | | 6a. | \$80.00 |
| 6b. Water, sewer, garbage collection | on | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Interne | t, satellite, and cable services | 6c. | \$100.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 3 | 7. | \$300.00 |
| 8. Childcare and children's educat | ion costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleani | ng | 9. | \$55.00 |
| 10. Personal care products and sei | vices | 10. | \$55.00 |
| 11. Medical and dental expenses | | 11. | \$0.00 |
| 12. Transportation. Include gas, main Do not include car payments | intenance, bus or train fare. | 12. | \$200.00 |
| 13. Entertainment, clubs, recreation | on, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and re | ligious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance deducted | d from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$115.00 |
| 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes dedu | cted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease payments: | | . • | |
| 17a. Car payments for Vehicle 1 | | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | | 17b | \$0.00 |
| 17c. Other. Specify: Bridgecrest F | Finance-2007 Hyundai | 17c | \$424.00 |
| 17d. Other. Specify: | | 17d | \$0.00 |
| | ntenance, and support that you did not report as deducted from | | \$0.00 |
| | Your Income (Official Form 106I). | 18. | |
| Specify: | pport others who do not live with you. | 10 | #0.00 |
| | ot included in lines 4 or 5 of this form or on Schedule I: Your Income. | 19. | \$0.00 |
| 20a. Mortgages on other property | normaca in filles 7 of 5 of this form of this schedule i. I the filletille. | 20a | \$0.00 |
| 20b. Real estate taxes. | | 20b | \$0.00 |
| 20c. Property, homeowner's, or re | nter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, and upk | | 20d | \$0.00 |
| 20e. Homeowner's association or | | 20d 20e | \$0.00 |
| , | ······ | 206 | φυ.υυ |

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| Debtor 1 Belinda | | | Plange | Case number (if known) | | |
|--------------------|-----------------------------|------------------------------|--|------------------------|-----|------------|
| First Nam | е | Middle Name | Last Name | | | |
| 21. Other. Specify | r: | | | | 21 | \$0.00 |
| 22. Calculate vo | ur monthly expenses. | | | | | |
| - | 4 through 21. | | | | | \$1,729.00 |
| | • | or Debtor 2) if any if | rom Official Form 106J-2 | | | \$0.00 |
| | 22a and 22b. The result is | ** | | | 22. | \$1,729.00 |
| | | your monthly expe | 11000. | | 22. | |
| • | ir monthly net income. | 4h.h.; in a a un a) fun un C | ala a di ila I | | | |
| . , | 12 (your combined mon | , | chedule I. | | 23a | \$1,731.34 |
| 23b. Copy yo | ur monthly expenses from | ı line 22 above. | | | 23b | \$1,729.00 |
| | your monthly expenses fr | , , | come. | | | \$2.34 |
| The resu | It is your monthly net inco | ome. | | | 23c | |
| For example, | do you expect to finish p | aying for your car lo | es within the year after an within the year or do yo odification to the terms of | ou expect your | | |

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| Fill in this infor | mation to identify your c | ase: | |
|---------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Belinda | | Plange |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| Case number | | | (State) |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | help you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Belinda Plange | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 10/20/2017 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Fill in this info | ormation to identify your c | ase: | | | | | |
|---------------------------------|--|-----------------------|---------------------------|-------------------|----------|----------|-----------------------------------|
| Debtor 1 | Belinda | | Plange | | | | |
| Dahland | First Name | Middle Na | ne Last Nam | Э | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Na | ne Last Nam | e | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illino | s | | | |
| Case number | | | (State | e) | | | |
| (If known) | | | | | | | Chook if this is a |
| Official | Form 107 | | | | | | Check if this is a amended filing |
| | ent of Financia | l Affaire fo | r Individuale I | Filina for | Rankru | intov | 04/1 |
| | ete and accurate as po | | | | | | |
| information. | If more space is neede | ed, attach a separa | | | | | |
| number (if k | nown). Answer every q | uestion. | | | | | |
| Part 1: Giv | e Details About Your | Marital Status a | nd Where You Lived | Before | | | |
| 1. What i | s your current marital sta | atus? | | | | | |
| Πм | arried | | | | | | |
| | ot married | | | | | | |
| O During | the last 2 years have ye | lived on | *hau *hauhauaa li. | | | | |
| | the last 3 years, have yo | u nved anywhere d | ther than where you hi | e now? | | | |
| □ No | o es. List all of the places yo | u lived in the last 2 | voors. Do not include v | thoro vou livo r | 2014 | | |
| | es. List all Of the places yo | dived in the last 5 | years. Do not include v | vilere you live i | iOvv. | | |
| De | ebtor 1: | | Dates Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived |
| | | | there | | | | there |
| | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| 2- | 47 Lake Park Dr | | | _ | | | _ |
| _ | umber Street | | From <u>03/2017</u> | Number Stre | et | | From |
| _ | | | To <u>05/2017</u> | - | | | То |
| Sr Ci | nyrna Georgia ty State | 30080 Zip Code | | City | State | Zip Code | |
| | | | | | Debtor 1 | <u> </u> | Same as Debtor 1 |
| | | | | | | | _ |
| Ni | umber Street | | From | Number Stre | et | | From |
| _ | | | To | | | | То |
| Ci | ty State | Zip Code | | City | State | Zip Code | |
| | ., Olale | -ib code | | Oity | Giaie | Zip Joue | |
| | <mark>he last 8 years, did you e</mark> <i>fories</i> include Arizona, Califo | | | | | | |
| ✓ No | | | | | 2 | | |
| | . Make sure you fill out So | chedule H: Your Co | odebtors (Official Form 1 | 106H). | | | |

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Case number (if known)

Plange

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$5472.51 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$14688.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$14000.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Debtor 1 Belinda

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Debtor 1 Belinda Plange Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| tor 1 | 1 Belinda | | | PI | ange | Case number | (if known) |
|--------------------|--|--------------------------------------|--|--|---|--|--|
| | First Name | | Middle Name | La | st Name | _ | |
| Insi con age | iders include your porations of whicl | relatives; and you are a for a busir | any general partner an officer, director, ness you operate a | s; relatives of any person in control | general partners; par , or owner of 20% or | tnerships of which y r more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to | an insider. | Dates of | Tatal am avest | Amazonakoran | Description this resument |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | 011 | Obsta | 7'- 0-1- | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | No | _ | aranteed or cosigne at benefited an ins | • | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

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Debtor 1 Belinda Plange Case number (if known) Middle Name First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Vehicle was repo due to back payments 6/12/2017 \$0 TIDEWATER MOTOR CREDIT Creditor's Name Explain what happened 6520 INDIAN RIVER RD Number Street Property was repossessed. Property was foreclosed. VIRGINIA BEACH Virginia 23464 Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property vehicle was repo due to back payments 10/2017 \$0 Exeter Finance LLC Creditor's Name **Explain what happened** PO BOX 166097 Number Street Property was repossessed. Property was foreclosed. **IRVING** Texas 75016 Property was garnished. City State Zip Code

Property was attached, seized, or levied.

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| Debt | tor 1 Belinda | Plange | Case number (if known) | |
|------|---|-----------------------------|--|---------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did a accounts or refuse to make a payment because you | | pank or financial institution, set off any amo | unts from your |
| | ✓ No Yes. Fill in the details. | | | |
| | | Describe the action th | e creditor took Date action was taken | Amount |
| | Creditor's Name | | | |
| | Number Street | | | |
| | | Last 4 digits of account | number: XXXX- | |
| | City State Zip Code | | | |
| 12. | Within 1 year before you filed for bankruptcy, was an appointed receiver, a custodian, or another official? | | possession of an assignee for the benefit of | creditors, a court- |
| | ✓ No | | | |
| | Yes | | | |
| Part | 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did y | you give any gifts with a t | otal value of more than \$600 per person? | |
| | ✓ No Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | Person to Whom You Gave the Gift | | | <u> </u> |
| | - 1.000 to 1.1100 Too date the diff | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| ebtor 1 | Belinda | | Plange | Case number (if know | vn) | |
|----------|--|--|---|------------------------------|--------------------------------------|---------------------|
| | First Name | Middle Name | Last Name | • | , <u> </u> | |
| | | | | | | |
| . Wit | thin 2 years before you filed for b | bankruptcy, did | you give any gifts or contributi | ons with a total value | of more than \$600 | to any charity? |
| | l No | | | | | |
| ✓ | No | | | | | |
| | Yes. Fill in the details for each of | gift or contributio | on. | | | |
| | Gifts or contributions to chari | tiae | Describe what you contrib | utod | Date you | Value |
| | that total more than \$600 | lies | Describe what you contrib | uteu | contributed | Value |
| | that total more than \$000 | | | | Continbuted | |
| | | | | | | |
| | Charity's Name | | | | | |
| | | | | | | |
| | | | | | | |
| | Number Street | | | | | |
| | ramsor stroot | | | | | |
| | City State | Zip Code | | | | |
| | Only Otale | Zip Code | | | | |
| + 6· | List Certain Losses | | | | | |
| | | | | | | |
| \A/:+ | thin 1 year before you filed for ba | | an way filed for bonkmintary dis | d laaa am.dhina ha. | sauce of theft five | athau diacatau au |
| | mbling? | alikiupicy of Sili | ce you med for bankruptcy, did | a you lose allytilling bet | Jause of their, ine, | other disaster, or |
| gai | | | | | | |
| ✓ | No | | | | | |
| F | Yes. Fill in the details. | | | | | |
| ш | | | | | | |
| | Describe the property you lost | and | Describe any insurance co | | Date of your | Value of property |
| | how the loss occurred | | Include the amount that insu | | loss | lost |
| | | | pending insurance claims on | i line 33 of <i>Scheaule</i> | | |
| | | | A/B: Property. | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| . Wit | List Certain Payments or Tu thin 1 year before you filed for ba out seeking bankruptcy or prepa lude any attorneys, bankruptcy pet | ankruptcy, did y aring a bankrupt | cy petition? | | | anyone you consulte |
| . Wit | thin 1 year before you filed for ba | ankruptcy, did y aring a bankrupt | cy petition? | | | anyone you consulte |
| . Wit | thin 1 year before you filed for ba out seeking bankruptcy or prepa lude any attorneys, bankruptcy pet No | ankruptcy, did y aring a bankrupt | cy petition? | | | anyone you consulte |
| Wit | thin 1 year before you filed for ba out seeking bankruptcy or prepa lude any attorneys, bankruptcy pet | ankruptcy, did y aring a bankrupt | cy petition? credit counseling agencies for se | ervices required in your b | ankruptcy. | |
| Wit | thin 1 year before you filed for ba out seeking bankruptcy or prepa lude any attorneys, bankruptcy pet No | ankruptcy, did y aring a bankrupt | cy petition? credit counseling agencies for se | ervices required in your b | ankruptcy. Date payment | Amount of |
| Wit | thin 1 year before you filed for ba out seeking bankruptcy or prepa lude any attorneys, bankruptcy pet No | ankruptcy, did y aring a bankrupt | cy petition? credit counseling agencies for se | ervices required in your b | ankruptcy. Date payment or transfer | |
| Wit | thin 1 year before you filed for bact seeking bankruptcy or prepalude any attorneys, bankruptcy pet No Yes. Fill in the details. | ankruptcy, did y aring a bankrupt | cy petition? credit counseling agencies for se | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for bact seeking bankruptcy or prepalude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm | ankruptcy, did y aring a bankrupt | cy petition? credit counseling agencies for se | ervices required in your b | ankruptcy. Date payment or transfer | Amount of |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or prepalude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | ankruptcy, did y aring a bankrupt | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | ankruptcy, did y aring a bankrupt | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or prepalude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | ankruptcy, did y aring a bankrupt | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | ankruptcy, did y aring a bankrupt | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or preparties on any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | ankruptcy, did y iring a bankrupt ition preparers, or | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or preparties any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois | ankruptcy, did yo | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or preparties on any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | ankruptcy, did y iring a bankrupt ition preparers, or | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or preparticular any attorneys, bankruptcy pet lude any attorn | ankruptcy, did yo | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address | ankruptcy, did yo | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None | ankruptcy, did yoring a bankruptition preparers, or tition preparers, or 60603 Zip Code | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address | ankruptcy, did yoring a bankruptition preparers, or tition preparers, or 60603 Zip Code | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or prepared any attorneys, bankruptcy pet lude any attorneys, | ankruptcy, did yoring a bankruptition preparers, or tition preparers, or 60603 Zip Code | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| . Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None | ankruptcy, did yoring a bankruptition preparers, or tition preparers, or 60603 Zip Code | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| . Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid | ankruptcy, did yoring a bankruptition preparers, or tition preparers, or 60603 Zip Code | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| . Wit | thin 1 year before you filed for backet seeking bankruptcy or prepared any attorneys, bankruptcy pet lude any attorneys, | ankruptcy, did yoring a bankruptition preparers, or tition preparers, or 60603 Zip Code | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| . Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid | ankruptcy, did yoring a bankruptition preparers, or tition preparers, or 60603 Zip Code | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| . Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid | ankruptcy, did yoring a bankruptition preparers, or tition preparers, or 60603 Zip Code | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid Number Street | ankruptcy, did youring a bankrupt ition preparers, or 60603 Zip Code if Not You | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| . Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid | ankruptcy, did yoring a bankruptition preparers, or tition preparers, or 60603 Zip Code | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| . Wit | thin 1 year before you filed for backet seeking bankruptcy or prepared any attorneys, bankruptcy pet INO Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid Number Street City State | ankruptcy, did youring a bankrupt ition preparers, or 60603 Zip Code if Not You | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |
| . Wit | thin 1 year before you filed for backet seeking bankruptcy or prepallude any attorneys, bankruptcy pet No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address None Person Who Made the Payment, Person Who Was Paid Number Street | ankruptcy, did youring a bankrupt ition preparers, or 60603 Zip Code if Not You | cy petition? credit counseling agencies for se Description and value of ar transferred | ervices required in your b | Date payment or transfer was made | Amount of payment |

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| Debtor | r 1 Belinda | Plange Cas | e number <i>(if known)</i> | |
|--------|--|--|--|------------------------------|
| | First Name Middle Name | Last Name | | |
| h | Within 1 year before you filed for bankruptcy, did nelp you deal with your creditors or to make pay no not include any payment or transfer that you listed | ments to your creditors? | If pay or transfer any property to any | one who promised to |
| - | √ No | | | |
| Ŀ | <u> </u> | | | |
| L | Yes. Fill in the details. | | | |
| | | Description and value of any prope transferred | payment or transfer was made | Amount of payment |
| | Person Who Was Paid | _ | | |
| | Number Street | _ | | |
| | | _ | | |
| | City State Zip Code | _ | | |
| | , | | | |
| | nclude both outright transfers and transfers made as and transfers that you have already listed on this state. No Yes. Fill in the details. | | interest or mortgage on your property). | Do not include gifts |
| L | Tes. I iii iii tile details. | | | |
| | | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
| | Person Who Received Transfer | _ | | |
| | Number Street | _ | | |
| | City State Zip Code Person's relationship to you | _ | | |
| | Person Who Received Transfer | _ | | |
| | Number Street | _ | | |
| | | _ | | |
| | City State Zip Code Person's relationship to you | _ | | |
| b | Within 10 years before you filed for bankruptcy, openeficiary? These are often called asset-protection devices.) | lid you transfer any property to a self-se | ttled trust or similar device of which | you are a |
| - | ✓ No | | | |
| Ŀ | <u> </u> | | | |
| | Yes. Fill in the details. | | | |
| | | Description and value of the prop | erty transferred | Date transfer was made |
| | Name of trust | | | |

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Debtor 1 Belinda Plange _ Case number (if known) Middle Name First Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Debtor 1 Belinda Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | | Belinda | | | Plang | ge | Cas | e number <i>(ii</i> | fknown) | | |
|------|------|----------------------------|----------------|--|---------------|------------|---|---------------------|---------------|------------------|----------------------------------|
| | | First Name | | Middle Name | Last N | Name | | | | | |
| 26. | Hav | e you been a part | y in any judic | cial or administr | ative proceed | ing under | any environmer | ntal law? In | clude settler | ments and ord | ers. |
| | | No Yes. Fill in the det | tails. | | | | | | | | |
| | | | | | Court or agen | су | | Nature | of the case | | Status of the case |
| | | Case title | | | | | | | | | Pending |
| | | | | | Court Name | | | | | | On appeal |
| | | Case number | | | NumberStreet | | | | | | Concluded |
| | | la. a | | | City | State | Zip Code | | | | |
| Part | 11: | Give Details Al | oout Your E | Business or Co | nnections to | o Any Bu | siness | | | | |
| 27. | With | nin 4 years before | | | | | - | _ | | o any busines: | s? |
| | | | | mployed in a tra oility company (L | - | | [·] activity, either f ırtnership (LLP) | ull-time or p | oart-time | | |
| | | A partner in | a partnership |) | | | , | | | | |
| | | | | inaging executiv of the voting or e | • | | ocration | | | | |
| | | No. None of the a | | | | 0014001 | or anor i | | | | |
| | | Yes. Check all the | | | | for each b | ousiness. | | | | |
| | | | | | Describe | e the natu | ire of the busine | ess | | | number Do not number or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | City | State | Zip Code | Name of | f account | ant or bookkeep | er | From | То | |
| | | | | | | | | | | | |
| | | | | | December | o the not: | af the busine | | Employer I | doublification v | number Do not |
| | | | | | Describe | e the natu | ire of the busine | :55 | | | number or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | Name of | faccount | ant or bookkeep | 201 | Dates busi | ness existed | |
| | | City | State | Zip Code | | i account | ant of bookkeep | Jei | From | To | |
| | | | | | | | | | | | |
| | | | | | Describe | e the natu | ire of the busine | ess | Employer I | dentification r | number Do not |
| | | | | | 2555115 | | , | - | include So | | number or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | Name of | f account: | ant or bookkeep | per | Dates busi | ness existed | |
| | | City | State | Zip Code | | . account | J. DOURRECH | | From | То | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Deb | tor 1 E | Belinda | | | Plange | Case number (if known) |
|------|---------|--|--------------------------------|---|-------------------------------|---|
| | F | First Name | | Middle Name | Last Name | |
| 28. | cred | iin 2 years before litors, or other pa No Yes. Fill in the de | arties. | bankruptcy, did yo | u give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | ш | | | | Date issued | |
| | | | | | Date Issueu | |
| | | Name | | | MM/DD/YYYY | |
| | | Number Street | | | _ | |
| | | Number Street | | | | |
| | | City | State | Zip Code | _ | |
| | | Oity | Olale | Zip Code | | |
| Part | 12: | Sign Below | | | | |
| t | true a | nd correct. I und kruptcy case can | erstand that result in fine | making a false stat s up to \$250,000, o | tement, concealing proper | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /S/ | Belinda Plang | | | <u> </u> |
| | | Signat | ture of Debtor | 1 | | Signature of Debtor 2 |
| | | Date 1 | 10/20/2017 | | | Date |
| Г | Did vo | u attach additio | nal nages to ' | our Statement of | Financial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? |
| | | | nai pagoo to | our otatomone or | i manoral / manorol marvio | auto i milg for Damitapto y (Omolar i om 107). |
| L | ✓ No | 0 | | | | |
| | Ye | es | | | | |
| | Did yo | u pay or agree to | pay someon | e who is not an att | orney to help you fill out b | ankruptcy forms? |
| ſ | ✓ No | 0 | | | | |
| į | Ye | es. Name of perso | n | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Fill in this information to identify your case: | | | | |
|---|------------|-------------|----------------------|--|
| Debtor 1 | Belinda | | Plange | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | |
| Case number (If known) | | | (State) | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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| Debto | r Belinda | | Plange | Case number (if | |
|---------|---|--------------------------------|--------------------------|---|--|
| 1 | First Name | Middle Name | Last Name | known) | |
| Part 2: | List Your Unexpired | Personal Property Leas | es | | |
| informa | ation below. Do not list r | | l leases are leases that | y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). | |
| De | scribe your unexpired po | ersonal property leases | | Will the lease be assumed? | |
| Le | ssor's name: BRIDGECF | REST | | □ No ☑ Yes | |
| | scription of leased operty: Lease on 2007 H | yundai Tucson Utility 4D GLS 2 | 2WD | | |
| Le | ssor's name: | | | No Yes | |
| | escription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | _ | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | _ | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | _ | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Part 3: | Sign Below | | | | |
| | er penalty of perjury, I do perty that is subject to a | | my intention about any | property of my estate that secures a debt and any personal | |
| × | /s/ Belinda Plange | | × | | |
| _ | Signature of Debtor 1 | | _ | nature of Debtor 2 | |
| С | Date 10/20/2017 MM/DD/YYYY | | Da | te MM/DD/YYYY | |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Dist | rict of Illinois | | |
|---|---|--|--------------------------------|------------------------|--------------------|
| In re | Belinda Plange | | Case N | 0. | |
| | Debtor | | | , | nown) |
| | | | Chapte | r Char | oter 7 |
| D | ISCLOSURE O | F COMPENSATION | ON OF ATTORN | EY FOR DEE | BTOR |
| compe | ensation paid to me within o | nd Fed. Bankr. P. 2016(b), I cerone year before the filing of the half of the debtor(s) in contemp | e petition in bankruptcy, or a | agreed to be paid to m | ne, for services |
| For leg | gal services, I have agreed to | accept | | | \$1,850.00 |
| Prior to the filing of this statement I have received | | | | | |
| Balanc | e Due | | | | \$1,850.00 |
| 2. The so | ource of the compensation | paid to me was: | | | |
| | ✓ Debtor | Other (specify | y) | | |
| 3. The so | ource of the compensation p | paid to me is: | | | |
| | ✓ Debtor | Other (specify | y) | | |
| 4. 🚺 l h | ave not agreed to share the embers and associates of n | e above-disclosed compensati ny law firm. | on with any other person ur | nless they are | |
| Ш me | | ove-disclosed compensation value firm. A copy of the agreem opensation, is attached. | | | |
| 5. In retu | rn for the above-disclosed | fee, I have agreed to render leg | gal service for all aspects of | the bankruptcy case, i | including: |
| a. | Analysis of the debtor's fit bankruptcy; | nancial situation, and renderin | g advice to the debtor in de | termining whether to | file a petition in |
| b. | Preparation and filing of a | ny petition, schedules, statem | ents of affairs and plan whi | ch may be required; | |
| C. | Representation of the deb | tor at the meeting of creditors | and confirmation hearing, a | and any adjourned hea | arings thereof; |
| 6. By agre | eement with the debtor(s), t | he above-disclosed fee does r | not include the following se | ervices: | |
| | | | | | |
| | | CERTIFIC | CATION | | |
| | that the foregoing is a com this bankruptcy proceeding | olete statement of any agreem js. | ent or arrangement for payn | ment to me for represe | entation of the |
| | 10/20/2017 | | /s/ Michael Mille | er | |
| | Date | | Signature of Attorne | ey | _ |
| | | | Semrad Law Firm | 1 | |
| | | | Name of law firm | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Plange, Belinda Debtor(s) | Case No | Case No | | |
|-----------------|----------------------------|--|--------------------------------------|--|--|
| | (, | Chapter. | Chapter7 | | |
| | VERIFIC | CATION OF CREDITOR MAT | TRIX | | |
| Ti knowledge | | y that the attached list of creditors is tr | rue and correct to the best of their | | |
| Date: | 10/20/2017 | /s/ Plange, Belin Plange, Belinda Signature of Del | | | |

Exeter Finance LLC PO BOX 166097 IRVING, TX, 75016

TIDEWATER MOTOR CREDIT 6520 INDIAN RIVER RD VIRGINIA BEACH, VA, 23464

RENTRECOVERY 2814 SPRING RD STE 301 ATLANTA, GA, 30339

Village at Lake Park 2085 Lake Park Drive SE Smyrna, GA, 30080

DISCOVER FIN SVCS LLC PO Box 3025 New Albany, OH, 43054

SCANA ENERGY MARKETING PO Box 100157 Columbia, SC, 29202

IRS Po Box 64338 Chicago, IL, 60664

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

Illinois Tollway PO Box 5544 Chicago, IL, 60680

VERIZON WIRELESS P.O. Box 660108 Dallas, TX, 75266 AT&T 2001 York Rd Oak Brook, IL, 60523

PLS Loan Store 346 Commons Dr # 348 Bolingbrook, IL, 60440

AmeriCash Loans PO Box 184 Des Plaines, IL, 60016

PayPal Credit PO Box 105658 Atlanta, GA, 30348

Village of Crestwood PO Box 6131 Carol Stream, IL, 60197 Case 17-31520 Doc 1 Filed 10/20/17 Entered 10/20/17 17:01:06 Desc Main Document Page 63 of 71

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| | | Northern District | of Illinois | |
|---|---|--|---|---|
| n re | Belinda Plange | | Case No. | |
| | Debtor | *************************************** | ** | (If known) |
| | • | | Chapter | Chapter 7 |
| DIS | SCLOSURE OF C | OMPENSATION | OF ATTORNEY F | OR DEBTOR |
| Pursuant compensa | to 11 U.S.C. § 329(a) and Fed | d. Bankr. P. 2016(b), I certify the | nat I am the attorney for the abo tion in bankruptcy, or agreed to n of or in connection with the | ovenamed debtor(s) and that |
| | services, I have agreed to acce | | | \$1,850.00 |
| Prior to th | ne filing of this statement I hav | ve received | | \$0,00 |
| Balance D | Oue Oue | | | \$1,850.00 |
| 2. The source | e of the compensation paid to | o me was: | | |
| $oxed{arphi}$ | Debtor | Other (specify) | | |
| 3. The sourc | e of the compensation paid to | o me is: | | |
| S | Debtor | Other (specify) | | |
| 4. I have memb | not agreed to share the above pers and associates of my law | e-disclosed compensation wit firm. | h any other person unless they | r are |
| HEHIL | e agreed to share the above-di pers or associates of my law fi people sharing in the compensa | rm. A copy of the agreement if | other person or persons who a ogether with a list of the name | re not s of |
| a. An | or the above-disclosed fee, I h alysis of the debtor's financia nkruptcy; | ave agreed to render legal sen Il situation, and rendering advi | vice for all aspects of the bankr ce to the debtor in determining | uptcy case, including: whether to file a petition in |
| b. Pre | eparation and filing of any peti | ition, schedules, statements o | f affairs and plan which may be | required; |
| c. Rep | presentation of the debtor at t | the meeting of creditors and co | onfirmation hearing, and any ac | ljourned hearings thereof: |
| | | ove-disclosed fee does not inc | | |
| | | | | |
| | | CERTIFICATIO | N | |
| I certify that t debtor(s) in this I | the foregoing is a complete st bankruptcy proceedings. | atement of any agreement or a | arrangement for payment to me | for representation of the |
| 10/ | 20/2017 | | /s/ Michael Miller | ļ |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |



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CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,850.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

Belinda Plange

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As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 10/20/2017

Client _____

Attorney _____

Belinda Plange

ABP.

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| Debtor 1 Belinda First Name | | Plange Ca Last Name | ase number (if known) | |
|---|--|--|--|--|
| Period Answer These Qu | uestions for Reporting Purposes | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily | consumer debts? Consumer debts? Consumer debts? Consumer debts? Eusines debts? Busines debts? Busines debts? | amily, or household as debts are debts th operation of the bus | purpose." at you incurred to obtain siness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | □ No. ☑ Yes. | | any exempt property bute to unsecured cre | is excluded and administrative editors? |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 ☐ 50-99 ☐ 190-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | Entered Services | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | ☑ \$0-\$50,000 ☑ \$50,001-\$100,000 ☑ \$100,001-\$500,000 ☑ \$500,001-\$1 million | \$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$8 | 0 million 00 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5 | 0 million 00 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| | I have examined this petition, and correct. If I have chosen to file under Chap of title 11, United States Code. It under Chapter 7. If no attorney represents me and I out this document, I have obtaine I request relief in accordance with I understand making a false stater connection with a bankruptcy cas both. 18 U.S.C. §§ 152, 1341, 15 ** /s/ Belinda Plange Signature of Debtor 1 Executed on 10/20/2017 | pter 7, I am aware that I may understand the relief availand I did not pay or agree to pay and read the notice requal the chapter of title 11, Ur ment, concealing property se can result in fines up to | ay proceed, if eligible able under each chast ay someone who is uired by 11 U.S.C. § nited States Code, so, or obtaining mone \$250,000, or imprise Signature of Debtor is some signature of Debtor in the source of | te, under Chapter 7, 11,12, or 13 upter, and I choose to proceed mot an attorney to help me fill 342(b). Specified in this petition. By or property by fraud in sonment for up to 20 years, or |
| | MM / DD / \ | YYYY | Executed on | MM / DD / YYYY |



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| | | 0400 17 0102 | Doc | cument F | Page 67 of 7 | '1 | 7.01.00 | Desc Main | |
|---|---|---|---|--|---|--------------------------------|----------------------------------|---|-----------------|
| FIII | in this infor | mation to identify your o | | | J | | | | |
| Det | otor 1 | Belinda | | Plange | | | | | |
| | | First Name | Middle Name | Last Name | | | | | |
| 4 | otor 2 ouse, if filing) | First Name | Middle Name | 1 1 | | | | | |
| | | | | Last Name | | | | | |
| Om | ieu States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | | |
| | se number sown) | | | (Olato) | | | | | |
| L | | | | | | | | Francis Color of the | |
| Of | ficial | Form 106De | } C | | | | | Check if t amended | |
| *************************************** | | | ***** | anda Cala | | | | | |
| And SHOW SERVICE | on the second second second second second | | Individual Debt | | | | | | 12/1 |
| If tw | o married ; | people are filing togeth | er, both are equally respon | nsible for supplyi | ng correct informa | ition. | | | |
| U.S. | ch or brobe | 1341, 1519, and 3571. | file bankruptcy schedules o ion with a bankruptcy case | or amended sche e can result in fir | dules. Making a fa les up to \$250,000 | ilse stateme), or imprisor | nt, concealing nment for up t | g property, or obtainir to 20 years, or both. 1 | ាថ្ង 8 |
| | Did you pa | sy or agree to pay some | one who is NOT an attorne | ev to help you fill | out hankruntey fo | rms2 | | CONTRACTOR OF THE PROPERTY OF | Attis Citatoria |
| | .∡ No | , | | oj to notp jou tii | out bankrapity it | n (113; | | | |
| | | | | | | | | | |
| | Yes. N | lame of person | <u> </u> | Attach Bai Signature | nkruptcy Petition Pre (Official Form 119). | eparer's Notice | e, Declaration, a | and | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Under pen that they a | alty of perjury, I declare | e that I have read the summ | mary and schedu | les filed with this | declaration a | and | | |
| × | /s/ Belind | | M) | × | | | | | |
| : ; | Signature of | Debtor 1 6 | | | Signature of Debtor | 2 | | | |

Date

MM/DD/YYYY

Date 10/20/2017

MM/DD/YYYY

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| Debtor | 1 Belinda | | Plange | Coop purple as 644 |
|---------|--|-----------------------------|---------------------------|--|
| | First Name | Middle Name | Last Name | Case number (if known) |
| 28. W | ithin 2 years before you reditors, or other parties No Yes, Fill in the details b | • | ou give a financial state | ment to anyone about your business? Include all financial institutions, |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | | |
| | City Sta | ate Zip Code | | |
| Part 12 | Sign Below | | | |
| | nkruptcy case can resul | t in fines up to \$250,000, | | ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Date 10/20/2 | 2017 | | Date |
| | No Yes rou pay or agree to pay s No | ges to Your Statement of | | |
| L | Yes. Name of person | | ···· | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119), |

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| Debtor Belinda | | Plange | Case number (if | | | |
|--|--|--|--|--|--|--|
| 1 First Name | Middle Name | Last Name | known) | | | |
| Part 2s List Your Unexpired F | Personal Property Leas | es | , | | | |
| For any unexpired personal proper | erty lease that you listed in | Schedule G: Executory | Contracts and Unexpired Leases (Official Form 106G), fill in the re still in effect; the lease period has not yet ended. You may J.S.C. § 365(p)(2). | | | |
| Describe your unexpired personal property leases | | | Will the lease be assumed? | | | |
| Lessor's name: BRIDGECREST | | | ☐ No ☑ Yes | | | |
| Description of leased property: Lease on 2007 Hyur | ndai Tucson Utility 4D GLS 2 | 2WO) | | | | |
| Lessor's name: | and the same of th | Secretary and Se | No Yes | | | |
| Description of leased property: | and the second s | | 105 | | | |
| Lessor's name: | | | No Yes | | | |
| Description of leased property: | | | | | | |
| Lessor's name: | | | ☐ No ☐ Yes | | | |
| Description of leased property: | | | - Learning of the control of the con | | | |
| Lessor's name; | | | □ No □ Yes | | | |
| Description of leased property: | | | Second 1 | | | |
| Lessor's name: | | | No Yes | | | |
| Description of leased property: | | | | | | |
| Lessor's name; | | | No Yes | | | |
| Description of leased property: | | | Comment | | | |
| ing Sign Below | E en Een en eeu eerste konste konste konste konste konste keer van de versche versche versche versche versche Versche en een een een een een een een een ee | k managa kanaga at managa katan kanaga k | | | | |
| Under penalty of perjury, I declar property that is subject to an un | re that I have indicated my | y intention about any pro | perty of my estate that secures a debt and any personal | | | |
| X /s/ Belinda Plange Signature of Debtor 1 | UNAL | 🗶 Signati | ure of Debtor 2 | | | |
| Date 10/20/2017 MM/DD/YYYY | | Date | MM/DD/YYY | | | |



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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| In re: Plange, Belinda | | |
|------------------------|----------------------------|--|
| Debtor(s) | | Case No |
| | | Chapter. Chapter7 |
| | V | ERIFICATION OF CREDITOR MATRIX |
| Th knowledge | e above named Debtors here | by verify that the attached list of creditors is true and correct to the best of their |
| Date: | 10/20/2017 | /s/ Plange, Belinda Plange, Belinda Signature of Debtor |

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| Debtor 1 Belinda | Plange | Case number (if known) | | |
|--|--|--|---|--|
| First Name Middle Name | Last Name | Sales Hallies (a trawn) | | |
| | | Column A Debtor 1 | Column B Debtor 2 or | |
| Numer to the amount of you contend that the amount if you contend that the amounder the Social Security Act. Instead, list it here: | ount received was a benefit | \$0.00 | non-filing spouse | |
| For you For your spouse | \$0.00 \$0.00 | | | |
| Pension or retirement income. Do not include any benefit under the Social Security Act. | amount received that was a | \$0.00 | *************************************** | |
| 10.Income from all other sources not listed above, amount. Do not include any benefits received under payments received as a victim of a war crime, a crime international or domestic terrorism. If necessary, list of page and put the total below. | the Social Security Act or | | | |
| 490 A | | | | |
| Total amounts from separate pages, if any, | | +\$0.00 | 4 | |
| 11. Calculate your total current monthly income. A | dd lines 2 through 10 for | \$912.08 | | \$912.08 |
| column. Then add the total for Column A to the to | tal for Column B. | | | 2012(0) |
| | | | | otal current ionthly income |
| Part 22 Determine Whether the Means Test A | pplies to You | | π | ionthly income |
| Calculate your current monthly income for the y Copy your total current monthly income from lin | ear. Follow these steps: e 11. | Copy line | 11 horo as | |
| Multiply by 12 (the number of months in a year | the state of the s | Оору міе | × | 912.08 |
| 12b. The result is your annual income for this part of | the form. | | 101 | 10,944.96 |
| 40.01 | | | (<u>L</u> <u></u> | 10,944.50 |
| 13 Calculate the median family income that applies | to you. Follow these steps: | | December 18 mar | |
| Fill in the state in which you live. | lilinois | | ** The Waspinery to 180 | |
| Fill in the number of people in your household. | † | | • | |
| Fill in the median family income for your state and size household. | e of | ere ere er men er er er | 13. | 50,765.00 |
| To find a list of applicable median income amounts, g | o online using the link specified in | the separate | <u> </u> | |
| instructions for this form. This list may also be availab 14. How do the lines compare? | le at the bankruptcy clerk's office. | | | |
| 14a. Line 12b is less than or equal to line 13. On Go to Part 3. | the top of page 1, check box 1, The | nere is no presumption of abus | ee. | |
| 14b. Line 12b is more than line 13. On the top o | f page 1, check box 2. The presum | ption of abuse is determined b | y Form 122A-2. | : |
| ari⊛s Sign Below | | | | |
| | | | | |
| By signing here, I declare under penalty of perjury that | at the information on this statement | and in any attachments is true | and correct. | : |
| A. L. | A Company of the Comp | | | |
| ✗ /s/ Belinda Plange | | | | |
| Signature of Debtor 1 | Signa | ture of Debtor 2 | | |
| Date 10/20/2017 | Date | 10/20/2017 | | |
| MM/DD/YYYY | | MM/DD/YYYY | | |
| If you checked line 14a, do NOT fill out or file Form If you checked line 14b, fill out Form 122A-2 and f | 122A-2. ile it with this form | | | |
| | The state of the s | er eterri er | | the second secon |